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The Politics of Schizophrenia: Psychiatric Oppression in the United States. David Hill. Lanham, Maryland: University Press of America, 1983, 577 pages, \$32.50 hard, \$22.00 paper.

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What is schizophrenia? The modern era's most dreaded and debilitating mental disease which calls for heroic and radical treatments? A vaguely defined construct justifying the oppression of mental patients—creating an unprecedented iatrogenesis? A bit of both, perhaps? The jury is not in yet, but David Hill has certainly made his concluding remarks, and the title of his book tells you which side he's on. *The Politics of Schizophrenia* is a wide-ranging, well documented, but sometimes vituperative indictment of those beliefs and practices used to justify the therapeutic blunders of our therapeutic state.

Between the covers of a single book, Hill offers a guided tour of 4,000 years of history of madness and societal reactions to mad persons; he traces Kraepelin's invention of dementia praecox, Bleuler's modification to schizophrenia and the myriad attempts since then to measure, validate, or treat this putative disease; Hill documents the brain-damaging effects of psychosurgery, electroshock, and neuroleptic drugs; and identifies what he believes to be the major obstacles to changes in the mental health field.

Throughout history, Hill argues in the first half of his book, we have controlled or punished the mad, and reasoned away our actions by appealing to prevailing magical, religious, or scientific concepts. In our century, "schizophrenia" is such a concept. On the basis of studies from the 1960s and 1970s, Hill argues that schizophrenia cannot be reliably measured. Still, recent improvements in diagnostic reliability—which should not be too difficult since DSM-III made schizophrenia into a serious disorder indeed—fail to impress (Colby and Spar, 1983). Because of these reliability problems and the lack of validity for the construct, Hill concludes that schizophrenia does not exist.

In the rest of the book, Hill tenaciously argues that in order to maintain a hegemony based upon a myth, psychiatry resorts to violence. It perpetrates this violence most harshly and frequently on those who already bear the brunt of society's other abuses: the poor, the old, women, racial minorities. To deny, excuse, or camouflage these facts, mental health apologists as well as seemingly dispassionate researchers engage in extraordinary mental gymnastics, distortions, and rationalizations. These exercises pollute whatever intellectual or moral integrity exists in the psychiatric profession as a whole. Perhaps the current rehabilitation of electroshock (NIMH, 1985) exemplifies this.

The points mentioned in my microscopic synopsis have all been made before, but I dare say, not often enough. In any case, the strength of the book lies in Hill's obvious ability to connect them afresh and document them relentlessly. He keeps the reader awake, if not depressed. Sometimes he is creative, as when he calculates the sole estimate in the literature (that I'm aware of) of the total *number* of persons worldwide afflicted by tardive dyskinesia, the serious neurological disorder induced by neuroleptics (73 million individuals). However, he does not simply present facts and figures, although

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knowledgeable readers will be impressed with the sheer quantity of information Hill has collected on almost any controversial issue in psychiatry. Hill wants to make sure beyond any doubt that we get the point, thus he never fails to tie an observation to his overall thesis. Therein lies both the book's appeal and difficulty.

The Politics of Schizophrenia was Hill's doctoral dissertation in clinical psychology. He states in the *Preface* that he is "unsatisfied with [its] rather academic style," but I for one would not wish to read his non-academic style. Hill uses any available opportunity to blame, condemn, or ridicule his opponents (e.g., psychiatry "is a racist patriarchy that renders the possession of a white penis so invaluable" [p. 418]). This is his personal touch. Offensive, to be sure, but one that actually adds to the book's worth as a personal document because Hill, plainly, is outraged. Perhaps he also feels guilty. As a young man, he assisted in administering electroshock to helpless and elderly mental patients when he did not know better.

This outrage also surfaces in statements from ex- or current patients reflecting on their experiences with the mental health system. These depictions are usually moving, jolting reminders that the official history of psychiatry, like that of war, is told by the victors, not the vanquished. I might suggest half-jokingly that those who coerce patients into treatment should be coerced to read this book.

In breadth, depth, and unrelenting polemic, Hill's essay reminds me of Thomas Szasz's The Manufacture of Madness (1970) and Schizophrenia (1976) and Peter Breggin's Psychiatric Drugs (1983)—all put together. I hasten to point out the crucial difference: Szasz and Breggin ground their objections and solutions in libertarianism, Hill grounds his in Marxism. Where Szasz sees the shadows of psychiatric imperialism and collectivism lurking behind every mental health maneuver, Hill sees capitalism, sexism, racism, ageism, and classism oppressing the poor and powerless and inviting one solution, "international socialism."

Is it surprising that the only comprehensive criticisms of the mental health system originate from either fringe of the ideological spectrum? In Brown's (1985) typology, (or tautology), just those critics who advocate radical reform bother to consider political-economic, institutional, and professional factors in their analyses; mainstream mental health liberalism or conservatism merely manage to address one or another factor.

Hill does not discuss schizophrenia in communist countries, a strange omission in light of the high frequency of schizophrenia diagnoses in Russian psychiatry, for example. In fact, the book's only reference to the Soviet Union occurs in a sentence informing us that it is a *capitalist* state—an assertion which accurately reflects the political sophistication Hill brings to the debate. Yet, it remains that the most radical mental health reforms have occurred in Italy, the Western country with the most powerful communist party. There, a coalition of psychiatrists led by Franco Basaglia, leftist political parties, trade unions, and citizens' groups succeeded in getting national legislation passed that abolished most overt psychiatric coercions (see assessment by Mosher, 1982).

Hill's book certainly drives home the point that redesigning the mental health system through some sort of enlightened or rational planning process will not accomplish much. That system, and its conceptual and practical pillars, are so interwoven in our social fabric that only structural changes will help the "consumers" of the ever-expanding and ever-damaging psychotechnology. The question is: should these changes be guided by marxist or socialist or conservative or libertarian principles? I fear that question is losing relevance. In the last analysis, Hill has added his voice to the woefully few others reminding us that there is so much to do and so little time to do it. Perhaps we should just start.

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